



# 2021 STUDENT SKILLS CHECKLIST

## NOTES REGARDING SKILLS

- NOTE: \* denotes a skill you might be tested on during your State of WI Skills Exam
- NOTE: Some skills require that you to raise and lower the bed however to prevent double jeopardy the lowering of the bed states “if raised”. This does NOT mean you should not raise the bed. It just means that if you do not raise the bed you will only lose 1 point instead of two.
- NOTE: If you forget to raise the bed and then make the correction, you need to lower it right away so you don’t lose the second point.
- NOTE: Only demonstration of the toothette’s, rectal thermometer, peri-care and cath care can be performed on the manikin. Students must perform all of the other skills on a class member.
- NOTE: Preparation steps and completion steps must be performed for each skill in both the lab and in clinical. Students may perform the actual skill to perfection but tend to fail the overall skill just for missing multiple preparation and completion steps.
- NOTE: Vitals, I & O, and urinary output must be written on the provided piece of paper. This can NOT be verbalized.
- NOTE: "Designated Storage Area" When testing supplies are centrally location on a table or counter, etc., and not in the drawers of the bedside stand. Students must return the supplies back where they found them.
- NOTE: Used equipment (wash basins, emesis basins, etc.) should be emptied, rinsed and DRIED before placing in the “Designated Storage Area” except for supplies containing urine (bed pan, fracture pan and graduates). Urinary supplies are only emptied & rinsed NOT dried.
- NOTE: Remember that the bathroom/commode and the sink are technically IN THE CLIENT’S ROOM no matter which bed you are using. You are not leaving the room or the client to use the toilet or sink. NO glove change is necessary.
- NOTE: Side rails and which side of the bed you stand on is going to depend on your resident’s ability to help you with the skill.
- NOTE: Videos often have the CNA’s using paper towels to protect the over bed tables before placing the wash basin on it but you should use a hand towel.
- NOTE: The videos typically have the CNA’s making a mitt out of the washcloths but both the 4-fold and open cloth are acceptable as well.
- NOTE: Videos use bar soap but in WI we are required to use liquid soap.
- NOTE: ONLY the peri-care and cath-care skill require more than one washcloth. All other skills only need ONE washcloth.
- NOTE: Students should sanitize their hands before and after each skill HOWEVER with PPE, Bedpan/Fracture pan, Cath Care and Peri-Care the full handwashing is required at the end of the skill.
- NOTE: We strongly recommend that you write a list of supplies needed next to each skill.

## Chapter 7.....

### PREPARATION STEPS– *These steps should be completed BEFORE EVERY Skill*

- 1 Gather your supplies.
- 2 Knock on the door, address client by preferred name and introduce yourself.
- 3 Wash or SANITIZE hands and put on gloves if needed.
- 4 Adjust bed height between mid-thigh and waist level when needed. This is REQUIRED for TED’s, Bed Bath, Dressing, Peri-Care, Side Lying and ROM Upper & Lower.
- 5 Explain procedure speaking clearly, slowly & directly, maintaining face-to-face contact with the resident when possible.
- 6 Ensure brakes are locked on the bed and pull privacy curtain.
- 7 Maintain respectful, courteous interpersonal interactions at all times. TALK TO YOUR RESIDENT!!
- 8 Ensure resident safety AT ALL TIMES.

### COMPLETION STEPS– *These steps should be completed at the END of EVERY Skill*

- 1 Ensure resident is in a comfortable position with good body alignment.
- 2 Place signaling device within reach.
- 3 Put away all supplies and ensure room is clean and tidy.
- 4 Lower side rails and push back privacy curtain.
- 5 Place bed in low position.
- 6 Properly remove & dispose of gloves into waste container without contaminating self.
- 7 Wash or sanitize your hands.
- 8 Ask the resident... “Is there anything else I can get for you before I leave?” Leave resident in a comfortable position.
- 9 Then Record and Report as needed.

## Chapter 8.....

## Chapter 6.....

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### \* **HANDWASHING** – page 70 (NOTE: Sanitizing is done at the start and completion of each skill unless otherwise noted.

*HANDWASHING is only necessary upon completion of PPE, Bedpan/Fracture pan, Cath Care, Peri-Care)*

- \_\_\_ 1 Remove your watch, or push it up on your forearm, and roll up or push up your sleeves. Ensure uniform and hands do NOT touch sink.
- \_\_\_ 2 Turn on the water at sink and adjust the temperature until it is comfortably warm.
- \_\_\_ 3 Place BOTH hands under the running water to **COMPLETELY** wet hands and wrists thoroughly keeping them lower than your elbows.
- \_\_\_ 4 Apply antimicrobial soap from the dispenser to your hands.
- \_\_\_ 5 Interlace fingers pointing downwards while rubbing your hands together vigorously to work up a lather.
- \_\_\_ 6 Lather all surfaces of wrists, hands, fingers and nails producing friction for at least 20 (twenty) seconds.
- \_\_\_ 7 Grasp wrists and circle with your other hand, scrub palms, backs of hands, areas between fingers.
- \_\_\_ 8 Clean fingernails by rubbing fingertips against palms of the opposite hand.
- \_\_\_ 9 After lathering for at least 20 (twenty) seconds, rinse all surfaces of wrists, hands, and fingers keeping hands lower than the elbows and the fingertips down.
- \_\_\_ 10 Use a clean, dry paper towel/towels to dry all surfaces of hands, wrists, and fingers then dispose of paper towel into waste container.
- \_\_\_ 11 Use another clean, dry paper towel to turn off faucet then dispose of paper towel into waste container or uses knee/foot control to turn off faucet. Exit by opening the door with your hip or shoulder. If there is a handle use another clean paper towel to open the door.
- \_\_\_ 12 **Do not touch inside of sink at any time. DO NOT RE-CONTAMINATE HANDS AT ANY POINT DURING PROCEDURE!**

### \* **HAND SANTIZE / HAND HYGIENE** – page 70

- \_\_\_ 1 Cover ALL surfaces of hands with hand sanitizer.
- \_\_\_ 2 Rub hands together until hands are **COMPLETELY DRY!**

### \* **DONNING AND REMOVING PPE (GOWN AND GLOVES) Empty Urinary Bag and WASH HANDS** – page 72

*Set up: Client/Actor is lying in bed holding cath tubing by leg. Manikin is not used for this skill.*

- \_\_\_ 1 **SANTIZE HANDS** then pick-up gown, unfold, and slide your arms through each sleeve; keeping opening of the gown in back.
- \_\_\_ 2 **Securely** fasten the ties at the back of your neck and waist making sure the back of clothing is covered by gown (as much as possible).
- \_\_\_ 3 Put the mask over mouth and nose then bend nose wire. Tie the top strings behind your head, then tie the bottom strings or place elastic loops around ears. Adjust for comfort. (*NOT WORN DURING TESTING*)
- \_\_\_ 4 Place the earpieces of the glasses over your ears or the headband around your head and adjust. (*NOT WORN DURING TESTING*)
- \_\_\_ 5 Inspect both gloves carefully for tears. Put gloves on carefully so they do not tear and pull the gloves up over the cuffs of gown.
- \_\_\_ 6 Enter room and complete the preparation steps.
- \_\_\_ 7 Empty urinary drainage bag as taught in that skill & memorize the output, then complete the completion steps.  
(Record output **AFTER** removing PPE and washing your hands)
- \_\_\_ 8 **Before removing gown**, with one gloved hand, grasp the other glove at the palm, and slightly tug, pull, or fold cuff so the cuff of the glove is located below the cuff of the gown to make it easy to slip your fingers from your opposite hand under the cuff of the glove without touching the gown. (contaminating yourself).
- \_\_\_ 9 Using your fingertips from the now half-gloved hand, grasp the opposite gloved hand at the heel of hand, remove glove turning it inside out. Dispose of glove or roll into a ball in the palm of the still half-gloved hand.
- \_\_\_ 10 Slip fingers from the ungloved hand under the cuff of the remaining glove at the wrist touching only the clean inside of the glove and the bare wrist to ensure you do NOT contaminate yourself. Remove glove turning it inside out as it is removed.
- \_\_\_ 11 Dispose of gloves into designated waste container without contaminating yourself.
- \_\_\_ 12 Touching only the earpieces or the head band, remove safety glasses and place in appropriate container.
- \_\_\_ 13 Carefully remove the gown without touching the outside of the gown. Unfasten the gown at the neck and then at the waist.
- \_\_\_ 14 Pull one sleeve over fingertips by slipping your fingers from opposite hand under the cuff at the wrist.
- \_\_\_ 15 Then grasp the other sleeve with covered hand, pull it over your fingertips, hold your arms out and away from your body to **ensure it does not touch the floor**. Continue to bring the gown forward rolling it into a ball as you pull it off.
- \_\_\_ 16 Dispose of gown in designated container without contaminating self.
- \_\_\_ 17 Remove mask by untying the bottom strings, then the top strings, or pull elastic loops from around ear. Hold by strings and dispose.
- \_\_\_ 18 **Perform handwashing** as directed in that skill.
- \_\_\_ 19 **RECORD OUTPUT (Measurements must be within 25 ml of instructor or observer)**

**HANDLING A BIOHAZARDOUS PLASTIC TRASH BAG** – page 75

*Single Bag:*

- \_\_\_ 1 Open trash bag and make a cuff around top edge by placing your hands several inches down on the outside of bag and pull outward.
- \_\_\_ 2 Place bag within easy reach of work area.
- \_\_\_ 3 When done, close by putting fingers under cuffed edge and pull edges together, touching only the outside of the bag and tie with knot.

*Double Bag:*

- \_\_\_ 1 Arrange with a co-worker to assist.
- \_\_\_ 2 Remove trash/linen bag and carry to door of room.
- \_\_\_ 3 Outside the door, co-worker holds up a cuffed bag and you place your bag into the clean bag without touching the clean bag.
- \_\_\_ 4 Co-worker closes bag, ties top edge in knot, and carries to designated disposal area.

**Chapter 9**.....

**\* COUNT & RECORDS RADIAL PULSE AND RESPIRATIONS** page 116 (*Testing Set up: Patient is sitting upright in chair*)

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Make sure the person is in a comfortable, relaxed position with arm in resting position.
- \_\_\_ 3 Locate the radial artery by gently pressing 2 - 3 fingers on the inside of the wrist on the same side as the thumb.
- \_\_\_ 4 Using a second hand, count beats for one full minute. Cue Instructor/observer when you are going to start and again when you end.
- \_\_\_ 5 Note the rhythm and force of the pulse.
- \_\_\_ 6 **Record the pulse rate. (You must be within plus or minus 4 beats of instructor or observer's reading)**
- \_\_\_ 7 Count respirations for one full minute. Cue Instructor/observer when you are going to start and again when you end.
- \_\_\_ 8 Note the rhythm and depth of the respirations and whether the client is having difficulty breathing.
- \_\_\_ 9 **Record the respiration rate. (You must be within plus or minus 2 breaths of instructor or observer's reading)**
- \_\_\_ 10 Completion Steps

**COUNT & RECORDS Apical PULSE** – page 118

**USING AN ORAL THERMOMETER** – page 116 (Remember... RED is for RECTAL, BLUE is for ORAL)

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Place client in Fowler's position.
- \_\_\_ 3 Inspect thermometer to ensure it is not broken or damaged in any way.
- \_\_\_ 4 Apply proper thermometer sheath (NOTE: If using glass, first shake so mercury-like substance is below 94 degrees).
- \_\_\_ 5 Place thermometer bulb slightly to one side under tongue and ask person to close lips around thermometer.
- \_\_\_ 6 While waiting, open an alcohol wipe pad to prepare for cleaning the thermometer when skill is complete.
- \_\_\_ 7 Wait 3 minutes for a glass thermometer or until electric thermometer beeps then remove thermometer, discard sheath.
- \_\_\_ 8 Read thermometer and clean with alcohol wipe.
- \_\_\_ 9 Place thermometer on clean dry paper towel or back in the proper container.
- \_\_\_ 10 Record temperature and finish with Completion Steps

**USING A TYMPANIC THERMOMETER** – page 116

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Place client in Supine or Fowler's Position.
- \_\_\_ 3 Remove probe from machine.
- \_\_\_ 4 Apply proper thermometer sheath and turn on thermometer.
- \_\_\_ 5 Grasp top of client's ear and pull up and back for an adult (down and back for a child).
- \_\_\_ 6 Insert probe into ear canal, pointing down and forward towards the person's nose.
- \_\_\_ 7 When you hear the beep, remove thermometer, and read the screen.
- \_\_\_ 8 Eject probe cover into trash, wipe clean with alcohol wipe, and place back into the proper container.
- \_\_\_ 9 Record temperature and finish with Completion Steps.

**USING A RECTAL THERMOMETER** – page 116 (Remember... RED is for RECTAL, BLUE is for ORAL)

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Place client in Side Lying Position with top knee bent.
- \_\_\_ 3 Inspect thermometer to ensure it is not broken or damaged in any way.
- \_\_\_ 4 Apply proper thermometer sheath (NOTE: If using glass, first shake so mercury-like substance is below 94 degrees).
- \_\_\_ 5 Lubricate the tip of the probe by placing a small amount of jelly on a tissue and dipping the tip of probe in it.
- \_\_\_ 6 Adjust covers to expose buttocks. Lift the client’s upper buttock and insert the probe into the anus no more than 1 inch for an adult and ½ inch for a child. Stay with the client and hold the probe in place.
- \_\_\_ 7 Wait 3 minutes (if using a digital, hold in place until it beeps) then remove thermometer. Discard sheath using toilet paper.
- \_\_\_ 8 Read thermometer and clean with alcohol wipe.
- \_\_\_ 9 Place thermometer on clean dry paper towel or back in the proper container.
- \_\_\_ 10 Record temperature and finish with Completion Steps.

**MEASURE & RECORD HEIGHT OF AMBULATORY CLIENT** – page 123 (NOTE: No paper towel is used)

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Ensure client has nonskid footwear on, then walk with client to the scale.
- \_\_\_ 3 Before client stands on scale, raise height bar to highest position.
- \_\_\_ 4 Assist person to stand on scale.
- \_\_\_ 5 Flip height rod up and slide down until it touches top of clients head.
- \_\_\_ 6 Assist client off scale.
- \_\_\_ 7 Record height based on indicator on scale and finish Completion Steps.

Note: If client cannot stand/walk, use tape measure to measure from top of head to bottom of feet while person is in supine position on bed.

**\*MEASURE & RECORD WEIGHT OF AMBULATORY CLIENT** – page 123 (NOTE: No paper towel is used)

- \_\_\_ 1 Preparation Steps (When testing the client is sitting upright in a chair with nonskid footwear on.)
- \_\_\_ 2 Ensure client has nonskid footwear on, then assist client to a standing position by offering them an arm (NOTE: Client pulls on your arm/elbow, you should NOT pull on their arm or shoulder) and walk WITH client to the scale.
- \_\_\_ 3 Balance the scale to zero and assist client onto the scale. Ensure client is centered with their arms at their side.
- \_\_\_ 4 Stand next to client and adjust scale to obtain client’s weight. (NOTE: Make sure weight is in the lb. slot and not the kg slot.)
- \_\_\_ 5 Help client step off scale, return client to their chair, assist them to sit in chair, and provide call light.
- \_\_\_ 6 **Record weight based on indicator on scale. (Weight measurement must within plus or minus 2 lbs of instructor or observer)**
- \_\_\_ 7 Completion steps

**RESIDENT ROOM ORDER** – page 126

- \_\_\_ 1 Treat client’s personal items with same care as you give your own valued possessions.
- \_\_\_ 2 Maintain neat appearance by disposing of disposables and putting non-disposables away in proper places.
- \_\_\_ 3 Clean over-bed table and night stand when done with sanitizer wipes.
- \_\_\_ 4 Change and remove all soiled linens as soon as possible.
- \_\_\_ 5 Remove trash frequently.
- \_\_\_ 6 Dispose of food items left in room.
- \_\_\_ 7 Maintain neat appearance of bed.
- \_\_\_ 8 Make sure equipment is in good working order.

**Chapter 10**.....

**MAKING AN UNOCCUPIED BED** – page 135

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Raise the bed between mid-thigh and waist level and adjust the bed so it is in a flat position.
- \_\_\_ 3 Put on clean gloves. Remove personal client items including clean blankets and bedspread. Place them in a clean area.

**MAKING AN UNOCCUPIED BED - continued**

- \_\_\_ 4 Remove pillowcases. Put dirty pillowcases in hamper and place pillows in a clean area.
- \_\_\_ 5 Without contaminating your uniform, move around the bed to loosen and remove soiled linen by rolling it towards the center of bed.
- \_\_\_ 6 Place dirty linen in hamper (do not put dirty linen on the over-bed table or clean or dirty linen on the floor).
- \_\_\_ 7 Apply mattress pad (if used) and bottom fitted sheet, keeping them straight and centered.
- \_\_\_ 8 Make bottom sheet smooth and/or tight, free of wrinkles.
- \_\_\_ 9 Place draw sheet (if used) and clean top sheet, blanket, and/or bed spread on the bed.
- \_\_\_ 10 Together, tuck top sheet, blanket and/or bedspread at the foot of the bed.
- \_\_\_ 11 Make mitered corners at the foot of the bed to hold linens in place.
- \_\_\_ 12 Properly apply clean pillowcases with zippers and/or tags to inside of pillowcase. For presentation purposes, place open end of the pillowcase facing AWAY from the door so client and guests only see the clean seam when they enter the room.
- \_\_\_ 13 Lower the bed and finish with Completion Steps

**MAKE AN OCCUPIED BED – page 137 NO GLOVE CHANGE IS NECESSARY DURING SKILL**

- \_\_\_ 1 Preparation Steps (NOTE: If client has catheter, IV, straps, etc. ensure they are safely secured in place).
- \_\_\_ 2 Raise the bed between mid-thigh and waist level and adjust the bed so it is in a flat position. Raise side rail on opposite side of bed.
- \_\_\_ 3 Put on clean gloves, remove personal client items including clean blankets and bedspread. Place them in a clean area.
- \_\_\_ 4 Cover client and dirty top sheet with a clean bath blanket making sure the client is unexposed at all times.
- \_\_\_ 5 Ask client to hold the blanket while you pull the soiled top sheet from the foot of the bed. Place soiled sheet in hamper.
- \_\_\_ 6 Ask client to roll onto their side towards the side rail. Provide assistance if necessary. DO NOT lay client on bare mattress at any time.
- \_\_\_ 7 Adjust pillow for comfort, ensure good body alignment, keep client covered at all times and if needed, properly clean client’s skin.
- \_\_\_ 8 Loosen bottom sheet on working side and roll or fan fold bottom sheet toward center of bed.
- \_\_\_ 9 If needed, clean and disinfect the mattress with disinfectant wipes.
- \_\_\_ 10 Place and tuck the clean mattress pad, fitted sheet and/or draw sheet on the exposed area and tuck under client. Secure fitted corners.
- \_\_\_ 11 Raise the second side rail and assist client with rolling back onto the clean bottom linens. Explain they will feel a bump in the center.
- \_\_\_ 12 Adjust pillow for comfort. Ensure good body alignment and ensure client remains covered at all times.
- \_\_\_ 13 Go to the opposite side of the bed, lower the side rail. Safely remove dirty linens without shaking and place in soiled linen container.
- \_\_\_ 14 If needed, clean client’s skin. Clean and disinfect the mattress with disinfectant wipes if needed.
- \_\_\_ 15 Unroll the clean linens onto the remaining exposed area of the bed. Secure fitted corners and smooth out the wrinkles.
- \_\_\_ 16 If needed, help client roll onto their back to the center of the bed. Adjust pillow and ensure good body alignment.
- \_\_\_ 17 Place a clean top linen over the covered client and remove bath blanket making sure the client is unexposed at all times.
- \_\_\_ 18 Ask client to hold the top sheet while you remove the bath blanket from the foot of the bed. Place bath blanket in hamper.
- \_\_\_ 19 Gently lift the client’s head while removing the pillow. Properly remove and dispose of soiled pillowcase.
- \_\_\_ 20 Replace pillowcase, gently lift the client’s head to replace & adjust pillow for comfort. Ensure opening is facing away from the door.
- \_\_\_ 21 Replace blankets and bedspread, ensure linen is centered on the bed, tuck sheets under the foot of mattress, make mitered corners, create a cusp along top of linens and leave bed neatly made.
- \_\_\_ 22 Lower the bed and return side rails to the lowered position. Ensure client is comfortable. Remove and dispose of dirty gloves.
- \_\_\_ 23 Completion Steps (Document any reddened areas or sores and take appropriate action.)

**Chapter 11.....**

**WHEELCHAIR TRANSPORT GUIDANCE – page 80**

- \_\_\_ 1 Ensure client's feet are positioned properly on footrests.
- \_\_\_ 2 Walk on right side of hall.
- \_\_\_ 3 Turn wheelchair around and walk down ramps backwards with client facing uphill.
- \_\_\_ 4 Enter and exit rooms / elevators backwards.
- \_\_\_ 5 Use caution when walking past doorways, around corners, and at hallway intersections.
- \_\_\_ 6 Take care not to bump client's arms and legs on doorframes when passing through doorways.
- \_\_\_ 7 Ensure brakes are UNLOCKED before leaving client.

## TRANSFER BELT PLACEMENT – page 146

- \_\_\_ 1 Place belt over clothes at waist line – ensure breasts are not pinned between waist and belt.
- \_\_\_ 2 Slip belt end through part of buckle with teeth. Cinch belt against teeth and slide through other side of buckle.
- \_\_\_ 3 Ensure belt is snug but not too tight. Should be able to slip 2 fingers between body and belt.
- \_\_\_ 4 Remove belt once transfer is complete.

## \* ASSIST TO AMBULATE USING A GAIT OR TRANSFER BELT – page 152 (NOTE: 3A is done for testing purposes)

- \_\_\_ 1 Preparation Steps plus...
  - Obtain gait belt of proper size.
  - **Obtain wheelchair and position in room out of the way with brakes LOCKED so client can sit in it after ambulating.**
  - Elevate the head of the bed to high fowlers position to ASSIST patient to the side of the bed.
- \_\_\_ 2 BEFORE assisting the client to a standing position.
  - **Check and/or lock bed brakes.**
  - Ensure client is wearing non-skid footwear. (I do this while they are still lying down in bed.)
  - Ensure bed is at a safe level with the client's feet flat on the floor.
  - Ensure client is “steady” before applying gait belt.
  - PROPERLY apply transfer belt securely at the waist over clothing/gown AND CHECK FOR TIGHTNESS.
  - Provide instruction to enable client to assist in standing including prearranged signal to alert client to begin standing.
- \_\_\_ 3A Ambulatory – (No Assistive Devices) Position yourself in front of the client. Bend your knees, have the client place their arms on your shoulders or if able, have the resident push off the bed with their hands. Grasp the gait belt on both sides of the waist with your palms up. Direct client to stand on the count of 3. Ensure client feels steady.
- \_\_\_ 3B If using a walker, position & stabilize the walker in front of the client. Grasp gait belt from the backside of the waist with your palms up. Direct client to stand on the count of 3. Assist client to standing position, stabilizing walker. Ensure client feels steady.
- \_\_\_ 3C If using a cane, the cane should be held in the hand that is on the client's strong side.
- \_\_\_ 4 Position yourself slightly behind the client on their weaker side and start on the same foot as the client.
- \_\_\_ 5 Hold the gait belt from the backside of waist with one hand, palm up. Offer your client your other hand as a stabilizer  
**Safely ambulate client at least 10 steps.**
- \_\_\_ 6 After ambulation, assist client to wheelchair in a safe and controlled manner. Remove transfer belt.
- \_\_\_ 7 Completion Steps

## LIFTING CLIENT’S HEAD AND SHOULDERS OFF THE BED – page 169

## \* PERFORM MODIFIED PASSIVE RANGE OF MOTION (PROM) - LOWER EXTREMITIES (HIP & KNEE) – page 157

- \_\_\_ 1 Preparation Steps Repeat each exercise 5 times or the number outlined in patient care plan.
- \_\_\_ 2 Raise the bed height and lay the bed in a flat position. Assist client to a supine position.
- \_\_\_ 3 Explain procedure and instruct the client to inform you if any pain is experienced during exercise. Watch the client’s face and eyes for expression of pain.
- \_\_\_ 4 **Do not cause discomfort/pain at anytime during ROM. Ask client at least once if they are experiencing any pain or discomfort.**
- \_\_\_ 5 Hip & Knee Exercises: Support the leg by placing one hand to under the knee & the other at the ankle. Move the joint gently, slowly & smoothly throughout exercises, discontinuing if client verbalizes pain. Do not force any joint beyond the point of free movement.
  - \_\_\_ \*Extension/Flexion: Bend the knee moving it toward the head to flex then straighten the client's leg to the normal position.
  - \_\_\_ \*Abduction/Adduction: Gently move the leg out away from the body, then return it to the center of the bed towards other leg.
  - \_\_\_ Hip Rotation: Keeping the client’s leg straight, pivot the client’s leg inward and then outward to rotate the hip.
- \_\_\_ 6 Ankle Exercises: Support the leg by placing one hand under the ankle & grasp the foot with the other hand. Keep the foot close to the bed and move the joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
  - \_\_\_ Dorsiflexion & Plantar Flexion: Push the foot toward head (dorsiflexion) & pull foot down towards mattress (plantar flexion).
  - \_\_\_ Inversion and Eversion: Pivot the foot inward and then outward.
- \_\_\_ 7 Toe Exercises: Support the foot with one hand. Gently move the toes with the other hand gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
  - \_\_\_ Extension/Flexion: Place your hand on top of the toes. Curl the toes downward and then straighten them.
  - \_\_\_ Abduction/Adduction: Separate each toe from the one next to it moving them apart and then together again.
- \_\_\_ 14 Repeat with opposite leg then finish with the Completion Steps

**\* PERFORM PASSIVE RANGE OF MOTION (PROM) - UPPER EXTREMITIES (SHOULDER)** – page 153

NOTE: For active ROM, neck exercises can also be done...up & down, side-to-side and ear to shoulder

- \_\_\_ 1 Preparation Steps - Repeat each exercise 5 times or the number outlined in patient care plan.
- \_\_\_ 2 Raise the bed height and lay the bed in a flat position. Assist client to a supine position.
- \_\_\_ 3 Instruct the client to inform you if pain is experienced during exercise. Watch the client's face and eyes for expression of pain. Do not force any joint beyond the point of free movement.
- \_\_\_ **3 Do not cause discomfort/pain at anytime during ROM. Ask client at least once if they are experiencing any pain or discomfort.**
- \_\_\_ 4 Shoulder Exercises: Support the limb by using one hand to hold the client's wrist and the other hand under the elbow moving the joint gently, slowly and smoothly through the range of motion.
  - \_\_\_ \*Extension/Flexion: Raise client's straightened arm (palm side down) from their side straight upward toward head to ear level then lower the arm down to side of body.
  - \_\_\_ \*Abduction/Adduction: Move client's straightened arm away from the body to shoulder level and return to side of body.
  - \_\_\_ Horizontal Abduction/Adduction: Move client's straightened arm (palm side up) out away from the side of body to shoulder level. Bend the elbow, touching the clients hand to the opposite shoulder then straighten to original position.
  - \_\_\_ Rotation: With the arm out to the side at shoulder level, bend clients arm at the elbow. palm facing the foot of the bed, move the back of hand towards the head of the bed and then palm side downward towards the floor.
- \_\_\_ 5 Elbow Exercises: Support the limb by using one hand to hold the client's wrist and the other hand under the elbow moving the joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
  - \_\_\_ Extension/Flexion: With the client's arm by his side with the palm up, bend the clients arm at the elbow so that the hand moves towards the shoulder on the same side. Then straighten the arm back down to the hip.
  - \_\_\_ Pronation/Supination: Bend the client's elbow so that the forearm is at a right angle to the bed. Gently turn the client's hand so that the palm is facing the foot of the bed, then turn the hand so the palm is facing the head of the bed.
- \_\_\_ 6 Wrist Exercises: Support the limb by using one hand to hold the client's wrist, palm facing down and the client's fingers with the other hand moving the joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
  - \_\_\_ Extension/Flexion: Bend the client's elbow so the forearm is at a right angle to the bed. Bend the wrist to move the client's hand forward and then straighten the wrist.
  - \_\_\_ Radial and ulnar deviation: With the client's hand still raised off the mattress, gently tilt the client's hand towards the thumb, then tilt the hand towards the little finger.
- \_\_\_ 7 Finger/Thumb Exercises: Support the limb by using one hand to hold the client's wrist and use the other hand to move the client's fingers. Move the joint gently, slowly and smoothly through the range of motion, discontinue exercise if client verbalizes pain.
  - \_\_\_ Extension/Flexion: Bend each of the client's fingers (one at a time) and the thumb to the palm of the hand. Then extend each finger (one at a time) and the thumb.
  - \_\_\_ Abduction/Adduction: Gently separate each finger from the finger next to it and then return together.
  - \_\_\_ Thumb opposition: Touch the tip of the thumb to each finger.
- \_\_\_ 8 Repeat with opposite arm then finish with the Completion Steps

**Chapter 12**.....

**MOVING A CLIENT UP IN BED 1 CNA** – page 170

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Ensure head of bed is as low as person can tolerate, remove pillow and place against headboard. Adjust linens.
- \_\_\_ 3 Face bed and position feet so one foot is about 12 inches from the other, bend hips and knees so back is straight.
- \_\_\_ 4 Ask person to bend their knees and place feet firmly on bed and hands palm side down on bed. If client has trapeze, have them use it.
- \_\_\_ 5 Place one arm under client's shoulders and one under buttocks. Ask client to push against bed with hands and feet on count of three.
- \_\_\_ 6 On count of three, shift weight to foot nearest headboard as person moves upward in bed.
- \_\_\_ 7 Replace pillow and cover client.
- \_\_\_ 8 Completion Steps.

**MOVING A CLIENT TO THE SIDE OF THE BED WITHOUT A DRAWSHEET - 1 CNA**– pages 174 – 175

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Ensure head of bed is as low as person can tolerate, remove pillow and place against headboard. Adjust linens.
- \_\_\_ 3 Place arms under client's shoulders and rock back on your feet to lift client upper body towards the side of the bed.
- \_\_\_ 4 Place arms under client's lower back and buttocks, rock back on your feet to lift client towards the side of the bed.
- \_\_\_ 5 Place arms under client's legs and rock back on your feet to lift client lower body towards the side of the bed.

## MOVING A CLIENT UP IN BED WITH A DRAW SHEET 2 CNA'S – page 172

- \_\_\_ 1 Preparation Steps PLUS ensure head of bed is as low as person can tolerate, remove pillow, place it against headboard & adjust linens.
- \_\_\_ 2 Place draw sheet under the client by rolling client side-to-side to properly place draw sheet.
- \_\_\_ 3 Both CNA's face bed and position feet so one foot is about 12 inches apart. Bend hips and knees so back is straight.
- \_\_\_ 4 Ask person to cross arms over their chest, bend their knees, place feet firmly on bed. If client has trapeze, have them use it.
- \_\_\_ 5 Roll draw sheet inward towards client's shoulder and hip and firmly grasp with both hands.
- \_\_\_ 6 Instruct client to push up on the count of three.
- \_\_\_ 7 On the count of 3, both CNA's, keeping elbows closest to body, lift and shift weight to foot nearest headboard as person moves upward in bed without dragging client on the bed.
- \_\_\_ 8 Remove draw sheet or tuck under mattress, ensure client is in good body alignment, replace pillow and cover client.
- \_\_\_ 9 Completion Steps.

## MOVING A CLIENT TO THE SIDE OF THE BED WITH A DRAWSHEET - 2 CNA'S – pages 174 – 175

- \_\_\_ 1 Preparation Steps PLUS ensure head of bed is as low as person can tolerate, remove pillow, place it against headboard & adjust linens.
- \_\_\_ 2 Place draw sheet under the client by rolling client side-to-side to properly place draw-sheet.
- \_\_\_ 3 Both CNA's face bed and position feet so one foot is about 12 inches apart, bend hips and knees so back is straight.
- \_\_\_ 4 Ask client to cross arms over chest and place legs flat on bed.
- \_\_\_ 5 Roll draw sheet inward towards persons shoulder and hip and firmly grasp with both hands.
- \_\_\_ 6 On the count of 3, both CNA's, keeping elbows closest to body, lift and move as person to the desired side of the bed without dragging client on the bed.
- \_\_\_ 7 Leave client in good body alignment.
- \_\_\_ 8 Completion Steps.

## LOGROLLING TECHNIQUE 2 CNA's – page 178

You must move or roll client as one unit so upper and lower body are moved at same time using two CNA's

- \_\_\_ 1 Both CNA's are on the same side of the bed. First CNA places their hands and arms under patient's head and shoulders. Second CNA place their hands under patient's hips and legs.
- \_\_\_ 2 Bend hips and knees, keep back straight and on the count of 3 rock backwards, transferring weight from front to back foot moving patient to the side of the bed closest to you.
- \_\_\_ 3 Raise side rail and both CNA's move to the other side of bed.
- \_\_\_ 4 Cross client's arms over chest with top arm indicating direction client is to roll and place a pillow between the client's legs.
- \_\_\_ 5 Put up the side rail and both CNA's go to the opposite side of the bed. First CNA places their hands over person's shoulders and upper hip and second CNA places hands over lower hip and calf, on the count of 3, roll client toward you with head, back and legs in straight line.
- \_\_\_ 6 Properly place pillows and make sure client is not laying on arm, position client to maintain straight alignment and adjust linens.
- \_\_\_ 7 Completion Steps

## **\* POSITIONING A CLIENT ON THEIR SIDE** – 1 CNA (Instructor or Observer will instruct you to which side, L or R) – pg176

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Raise the bed. Lay the bed in flat position.
- \_\_\_ 3 Ask client to lift their head or gently lift their head to remove the pillow (NOTE: Pillow can remain but MUST be readjusted after rolled).
- \_\_\_ 4 **Raise the side rail on the side of the bed to which the client will be rolling.**
- \_\_\_ 5 CNA then goes to the opposite side of the bed (This is called the "working" side of the bed).
- \_\_\_ 6 Face the bed, position your feet so they are about 12" apart, bend your hips and knees so your back remains straight.
- \_\_\_ 7 Ask client to cross their arms over their chest and ankles towards the direction that you are turning the client.
- \_\_\_ 8 Place one arm under the client's neck and shoulders, the other arm under the person's upper back. On the count of 3, rock backward and lift the client's upper body towards you.
- \_\_\_ 9 Reposition your hands, placing one hand under the client's waist and the other under the client's thighs. Using the same motion, count to 3 and rock backward, lifting the client's lower body toward you.
- \_\_\_ 10 Reposition your hands under the client's calves and feet and on the count of 3, move the clients lower legs towards you so that the person is in proper body alignment. Raise second side rail to prevent client from falling out of bed.
- \_\_\_ 11 Position yourself on the side of the bed to which the person is turning. Using proper body mechanics, place one hand on the person's far shoulder, the other on her upper thigh. Roll the person toward you and the first side rail by transferring your wt from your front foot to your back foot. If able, have the client reach across and grab the side rail to assist. (You may also roll client away from you)
- \_\_\_ 12 Place a pillow or a rolled towel, or blanket alongside the client's back to stop them from rolling backwards. Assist the client to lift their head and replace the pillow to ensure their comfort or adjust for comfort if pillow was left in place. Place a third pillow lengthwise between the client's lower legs with the bottom leg straight and the top leg slightly bent. Pillow should provide support both the knee and the ankle. Place a fourth pillow under the client's top arm. Ensure client is not lying on their lower arm.
- \_\_\_ 13 Completion Steps



## POSITIONING A CLIENT ON THEIR SIDE – 2 CNA’s WITH A DRAW SHEET – page 176

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Raise the bed. Lay the bed in a flat position and place a draw sheet under client.
- \_\_\_ 3 With one CNA on each side of the bed, ask the client to lift their head or if unable, gently lift their head to remove the pillow.
- \_\_\_ 4 Face the bed, position your feet so one foot is about 12” in front of the other, bend your hips and knees so your back remains straight.
- \_\_\_ 5 Both CNA’s should loosen the draw sheet and roll it towards the client. Ask client to cross their arms over their chest and cross their ankles towards the direction that you are turning them.
- \_\_\_ 6 Using proper body mechanics, both CNA’s should grasp the draw sheet with their palms up and close to the client’s body. On the count of 3, together move the client by lifting up and moving the draw sheet toward side of the bed.
- \_\_\_ 7 After rolling client, unroll and retuck or remove the draw sheet. Client should be lying in the center of the bed on their side.
- \_\_\_ 8 Place a pillow or a rolled blanket along the client’s back to stop them from rolling backwards. Assist the client lift their head and adjust or replace their pillow to ensure comfort. Place a third pillow lengthwise between the client’s lower legs with the bottom leg straight and the top leg slightly bent. Place a fourth pillow under the client’s top arm. Ensure client is not lying on their lower arm.
- \_\_\_ 9 Completion Steps

## **\* PIVOT TRANSFER OF WEIGHT BEARING, NON-AMBULATORY RESIDENT BED TO W/C USING GAITBELT** – page 181

- \_\_\_ 1 Preparation Steps **NOTE: You MUST ASSIST client to a sitting position. You cannot ask them to sit up on the side of bed.**
- \_\_\_ 2 Remove footrests and position wheelchair next to the foot of the bed on the client's stronger side so client is pivoting on sturdier leg.
- \_\_\_ 3 **Lock the brakes on the wheelchair to ensure client safety.**
- \_\_\_ 4 Position the bed at a safe level (even with the wheelchair) **and ensure the bed wheels are in the locked position.**
- \_\_\_ 5 Raise head of bed so client is in high fowler's position. (I suggest putting client’s shoes on while still in bed)
- \_\_\_ 6 Use proper body mechanics to assist client to a sitting position with feet flat on floor (lower bed if needed). Ensure client is steady.
- \_\_\_ 7 Pull W/C up so the front of arm rest is against client’s thigh and with wheelchair arm/wheel touching the side of the bed.
- \_\_\_ 8 Properly apply gait belt securely at the waist over clothing/gown. Check gait belt by slipping 2 fingers between gait belt and client.
- \_\_\_ 9 Provide verbal instructions to enable client to assist in transfer including prearranged signal to alert when to begin standing.
- \_\_\_ 10 Using proper body mechanics, position yourself directly in front of the client. Grasp the gait belt with fingers in upwards position.
- \_\_\_ 11 Position yourself to ensure safety for both yourself and the client during transfer. Count to three to alert client to begin standing. Have the client push off the bed with their hands as they stand.
- \_\_\_ 12 On signal, gradually assist client to standing position maintaining stability of client’s legs. Pause to ensure client is steady.
- \_\_\_ 13 **In a controlled manner, ensure client's safety. Assist the client to pivot** so they are standing in front of the w/c with the back of their legs against seat. *(At NO time should the client be stepping backwards to the w/c. Ensure the w/c is close to client before standing.*
- \_\_\_ 14 Tell the client to feel for the arms of the chair and then lower the client into the wheelchair using proper body mechanics.
- \_\_\_ 15 Position client with hips touching back of wheelchair and remove transfer belt.
- \_\_\_ 16 Position clients feet on footrests and ensure client is in a comfortable position with good body alignment.
- \_\_\_ 17 UNLOCK wheelchair brakes and perform completion steps.

## REPOSITIONING A CLIENT IN A CHAIR – 1 CNA – page 180 *(NEVER pull client back in chair by the seat of their pants)*

- \_\_\_ Option 1: 1 CNA if client is able to stand, assist to standing position, pull wheelchair towards back of legs and assist to sit.

## REPOSITIONING A CLIENT IN A CHAIR – 2 CNA’s – page 180 *(NEVER pull client back in chair by the seat of their pants)*

- \_\_\_ Option 1: 2 CNA’s if client is able to stand, assist to standing position, pull wheelchair towards back of legs and assist to sit.
- \_\_\_ Option 2: 2 CNA’s if client is UNABLE to stand, properly connect mechanical lift, raise client and replace to chair.

## USING A MECHANICAL LIFT FOR TRANSFERS – 2 CNA’s – page 185

- \_\_\_ 1 Preparation Steps including gather lift, sling and chair to which client will be transferred.
- \_\_\_ 2 To place sling, roll person side to side. Ensure top of sling is under shoulders and bottom is at the knees.
- \_\_\_ 3 Wheel lift into place over client, spread legs of lift to widest position and lock brakes.
- \_\_\_ 4 Attach sling to lift, have client cross arms over chest and using controls, lift person off bed, release brakes.
- \_\_\_ 5 Move lift to chair as co-worker guides client over chair. Lock brakes.
- \_\_\_ 6 Slowly lower client into chair making sure hips are against chair back.
- \_\_\_ 7 Remove sling from lift and move lift away. Replace footrests onto the wheelchair and place client’s feet properly on footrests.
- \_\_\_ 8 Remove sling or keep in place according to facility policy. *(If not removed, ensure sling is wrinkle free, not rubbing skin, loops tucked)*
- \_\_\_ 9 Completion Steps

\* **MOUTH CARE** – page 203 (During testing, client will be lying in bed)

- \_\_\_ 1 Preparation Steps MINUS putting on gloves... See step 4
- \_\_\_ 2 Place a towel or paper towel on the over-bed table and arrange your supplies.
- \_\_\_ 3 Get a cup of water (or water/mouthwash solution).
- \_\_\_ 4 Assist client to an upright sitting position (AT LEAST 45 degrees) by elevating the head of the bed.
- \_\_\_ 5 AFTER gathering supplies, put on clean gloves and place a towel across client's chest to protect their clothing.
- \_\_\_ 6 Moisten toothbrush by pouring water/mouthwash solution over it. DO NOT DUNK THE TOOTHBRUSH IN THE CUP.
- \_\_\_ 7 Apply toothpaste to moistened toothbrush.
- \_\_\_ **8 Clean mouth by brushing upper teeth and gums, then lower teeth and gums, then the tongue using gentle motions while VERBALIZING each surface you are cleaning (Inner, outer, chewing and tongue).**
- \_\_\_ 9 Maintain a clean technique with placement of toothbrush (you can place it on a paper towel).
- \_\_\_ 10 Hold the emesis basin to the client's chin while client rinses mouth. You must hold the cup to client's mouth and assist them to take a drink with water/mouthwash solution. Wipe face with clothing protector.
- \_\_\_ 11 Break off about 18 inches of dental floss and gently floss all teeth. (Not necessary for testing)
- \_\_\_ 12 YOU must hold the emesis basin to the client's chin while client rinses mouth with remaining water/mouthwash solution.
- \_\_\_ 13 Wipe clients mouth and place the clothing protector in the hamper.
- \_\_\_ 14 Ask the client if they would like to put on lip balm (Not necessary for testing).
- \_\_\_ 15 Empty, rinse and dry the basin. Then rinse toothbrush and place used toothbrush in the basin.
- \_\_\_ 16 Place toothpaste, basin and toothbrush in designated storage area.
- \_\_\_ 17 Completion Steps

**MOUTH CARE TOOTHETTE CLIENT** – page 206

- \_\_\_ 1 Preparation Steps and place a towel on the over-bed table and arrange your supplies. Prepare a water/mouthwash solution.
- \_\_\_ 2 Position client in Fowler's position (75-90 degrees) with their head turned well to one side or as appropriate to avoid choking or aspiration and place a towel across their chest & another under their head to protect the clothing and bedding.
- \_\_\_ 3 Put on clean gloves and place emesis basin on the towel near the person's cheek.
- \_\_\_ 4 Dip mouth sponge into water/mouthwash cleaning solution (NO TOOTHPASTE), Press swab against side of cup to remove excess.
- \_\_\_ 5 Tell client before gently touching swab to lips and circle the lips lightly. Gently open lips and swab inner lips, then move to inner cheeks, and front of gums and teeth. Without forcing, move swab to roof of mouth, then onto inside of teeth. Finish by using a rolling motion from back to front over tongue surface. Take a new swab and repeat as needed.
- \_\_\_ 6 Clean and dry client's face and apply lip balm.
- \_\_\_ 7 Empty, rinse, and dry basin. Discard disposable items in waste can. Place towel and washcloth in linen hamper.
- \_\_\_ 8 Completion Steps

\* **CLEAN UPPER OR LOWER DENTURE** – page 204

- \_\_\_ 1 Preparation Steps (Dentures will be in a denture cup on the storage table - you must introduce yourself to the client, explain what you are going to do, then retrieve the dentures).
- \_\_\_ 2 Place a towel on the over-bed table and arrange your supplies. Prepare a water/mouthwash solution.
- \_\_\_ 3 Assist client to an upright sitting position (75-90 degrees) and place a towel across their chest to protect the clothing.
- \_\_\_ 4 Put on clean gloves before CAREFULLY handling dentures to avoid damage (through entire procedure).
- \_\_\_ 5 Have the client carefully remove their dentures and put them in the emesis basin. Provide assistance if needed. Take them to the sink.
- \_\_\_ 6 Line the bottom of the sink with a washcloth or several paper towels to prevent damage to the dentures. Use a clean paper towel to Turn on the cool water. Place a barrier on the side of the sink for placement of denture cup and dentures.
- \_\_\_ 7 Dampen toothbrush, apply denture toothpaste, remove one denture from cup, immediately rinse denture cup and lid in cool running water and fill denture cup with cool water. Place cup and lid on the paper towel. Then rinse denture in cool water.
- \_\_\_ 8 Thoroughly brush all denture surfaces including inner, outer and chewing surfaces using a circular motion.
- \_\_\_ 9 Thoroughly rinse all surfaces of denture under cool water and place in denture cup. Cover the cup with the lid.
- \_\_\_ 10 Rinse toothbrush, place in emesis basin maintaining a clean technique with placement of toothbrush. Return to designated area.
- \_\_\_ 11 NOTE: If client is putting dentures back in mouth – Turn off water with a clean, dry paper towel, take dentures back to the bedside, give the client a mouthful of the mouthwash mixture to rinse their mouth. Hold the emesis basin under the clients chin to catch the liquid & dry the client's mouth. Help the client clean the roof of their mouth, cheeks, gums, and tongue with a sponge brush dipped in water/mouthwash solution. If they have natural teeth, help them brush and floss them. Give the client another mouthful of water/mouthwash solution. Hold the emesis basin under the chin to catch the liquid and dry the mouth. Give the dentures to the client or place them back in the client's mouth.
- \_\_\_ 12 Turn off water with a clean, dry paper towel. Remove & properly dispose of sink liner. Clean up the remaining work area.
- \_\_\_ 13 Completion Steps – Immediately report damaged or ill-fitting dentures or mouth sores.

### **EYE GLASS CARE** – page 195

- \_\_\_ 1 Handle carefully.
- \_\_\_ 2 Clean with soap and water, dry with soft cloth OR use eyeglass cleaner and tissues OR eyeglass cleaner wipes.
- \_\_\_ 3 Always store in case when not in use.
- \_\_\_ 4 Report any vision or eyeglass problems to the nurse immediately.

### **HAIR CARE** – page 208

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Place a towel on the over-bed table and arrange your supplies.
- \_\_\_ 3 Position client in Fowler's position (75-90 degrees) or up in chair.
- \_\_\_ 4 Place a towel over the client's shoulders and remove eye glasses if they are wearing them.
- \_\_\_ 5 Ask client how they would like their hair combed.
- \_\_\_ 6 Comb or brush hair gently and to the client's liking. Give client a mirror so they can see.
- \_\_\_ 7 Leave hair neatly brushed, combed, or styled.
- \_\_\_ 8 Discard linen in appropriate container.
- \_\_\_ 9 Completion steps

**SHAMPOOING A PERSON'S HAIR IN BED** – page 209 Supplies: garbage can, large plastic bag with bath blanket can be used if shampoo tray is not available, paper towels, 2 towels, 1 wash cloth, bed protector, two wash basins (1 filled with hot water 105- 115 degrees), cup, shampoo and conditioner if used, comb, brush, gloves.

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Cover table, arrange supplies, fill basin with warm water, have client check water temperature and place on table.
- \_\_\_ 3 Place empty basin on chair close to head of bed.
- \_\_\_ 4 Place client in high fowlers and remove any hair pins, etc., Remove any hair tangles.
- \_\_\_ 5 Lower head of bed to lowest tolerated position. Gently lifting client's head, remove pillow from head and place bed protector.
- \_\_\_ 6 Gently place shampoo tray under client's head and lower head to rest on tray. Place folded towel under neck for comfort.
- \_\_\_ 7 Make sure tray is directly aimed at basin in chair for runoff.
- \_\_\_ 8 Place towel across chest and give client washcloth to hold over eyes.
- \_\_\_ 9 Wet hair with cups of water until fully wet. Apply small amount of shampoo.
- \_\_\_ 10 Massage scalp with fingertips moving from forehead to back of head until completely lathered.
- \_\_\_ 11 Rinse completely with cups of water. Apply conditioner, if used, and rinse if needed.
- \_\_\_ 12 While assisting client to raise head and shoulders off tray, wrap head with towel and remove tray.
- \_\_\_ 13 Replace pillow under bed protector until hair dry and replace any wet linens.
- \_\_\_ 14 Proceed with Hair Care instructions.
- \_\_\_ 15 Completion Steps

### **ASSISTING WITH SHAVING** – page 211

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Cover table with paper towel, arrange supplies. Fill wash basin with warm water, have client check water temp.
- \_\_\_ 3 Place client in High Fowlers position, place towel over chest. Put on gloves.
- \_\_\_ 4 Inspect skin for moles, birthmarks or sores. Assist the client to wash face with soap and warm water. Hold warm washcloth on face for a couple minutes to soften whiskers.
- \_\_\_ 5a Rinse safety razor, apply shaving cream. Hold skin of one cheek tight with fingers of opposite hand and draw razor downward in short strokes in the direction hair grows. Repeat over other cheek, chin, lips and neck. Rinse razor often. Ask client to tilt head or puff cheeks as needed.
- \_\_\_ 5b If using electric razor, pre shave lotion may be used. Hold skin tight while moving razor across client's face according to manufacturer's instructions, usually in a circular motion covering all shaving areas of face and neck. Clean razor head after use.
- \_\_\_ 6 Rinse face with warm water, dry, and place cloth and towel into hamper.
- \_\_\_ 7 Apply aftershave, if used. Provide client with a mirror to check shaved area and finish with completion steps.

### **INSERTING AND REMOVING A HEARING AID** – page 217 *SSC pg 11*

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Help the client into a comfortable position that allows you to easily access their ear.
- \_\_\_ 3 TO INSERT HEARING AID: Ensure the hearing aid is turned off, the volume is turned down and the battery is installed properly.
- \_\_\_ 4 Inspect the clients ear canal for excessive wax or fluid. If necessary, gently wipe the ear canal with a warm, wet washcloth and dry.
- \_\_\_ 5 Gently place the narrow end of the hearing aid in the clients ear canal and rotate the hearing aid so that it follows the curve of the ear. Use one hand to gently pull down on the client's earlobe, use the other hand to gently push up and in to seat the hearing aid properly. Turn on hearing aid and adjust volume.
- \_\_\_ 6 TO REMOVE HEARING AID: Use one hand to gently pull the top of the client's ear up, use the other hand to gently lift the hearing aid up and out of the ear canal.
- \_\_\_ 7 Turn the hearing aid off or open battery compartment. Wipe the ear piece with a clean dry cloth and store in appropriate container.
- \_\_\_ 8 Remove or open battery compartment and place the hearing aid in its case.

**\* COMPLETE CLOTHING CHANGE – BEDRIDDEN CLIENT** – page 213

- \_\_\_ 1 Preparation Steps (Instructor or Observer will choose weak side, L or R. Listen carefully) (In class practice dressing from both sides).
- \_\_\_ 2 Ask the client what they would like to wear. Show them a couple options and dress client in the clothing of their choice.
- \_\_\_ 3 Lay client flat in bed. Cover client with a bath blanket to avoid over exposure and raise side rails.

DRESSING BOTTOM CLOTHING (NOTE: Underwear is not used when testing – Pants only)

- \_\_\_ 4 Underwear & **Pants** – Gathering leg openings to waist band. **Help person place WEAK leg into opening FIRST**, then the other, repeat with pants. Inch up the legs as far as possible. Have client lift buttocks off bed if able or assist client with rolling side-to-side.
- \_\_\_ 5 Socks & Shoes – Gather opening of sock, place on toes and guide onto foot adjusting as needed. If shoes have laces, loosen and guide foot into shoe, adjust fit, secure laces/fasteners. (Note: When testing- the Actor bring Gripper Socks in place of shoes)

UNDRESSING: Remove Nightgown

- \_\_\_ 6 Remove strong arm first then weaker side and dispose of gown into soiled linen container. Recover client with bath blanket.

DRESSING TOP CLOTHING (NOTE: Bra and undershirt is not used when testing – shirt only)

- \_\_\_ 7 Elevate the head of bed and have client lean forward so you can easily adjust the clothing behind the clients back.
- \_\_\_ 8 Bra – Place arm through bra straps, adjust straps and cups of bra. Undershirt – gather hem of undershirt to neck opening. Place arms in armholes and slip over client’s head, then lift and pull down in back. **Shirt** – Put your hand through wrist of shirt, hold client’s hand and **slip sleeve onto clients WEAK arm FIRST**. Assist client to sit forward so you can bring the top around back of shoulders, then assist with stronger arm. Adjust shirt as necessary and button it up.
- \_\_\_ 9 Completion Steps - Leave client in a comfortable position.

**\* APPLIES ONE KNEE-HIGH ANTI-EMBOLIC STOCKING** – page 216

(You MUST HAND wash & hang the stocking to dry at the end of each class AND while on the job. Do NOT send to laundry)

- \_\_\_ 1 Preparation Steps Be sure to raise the bed to good working height.
- \_\_\_ 2 Expose **ONLY** one leg. (Instructor or Observer will choose left or right leg. Listen Carefully).
- \_\_\_ 3 Roll, gather, OR turn stocking inside-out to the heel.
- \_\_\_ 4 Hold the stocking so when you place it on the foot, the toe and heel will be in the correct position.
- \_\_\_ 5 Move the foot and leg gently and naturally, avoiding force and over-extension of limb and joints during the entire procedure.
- \_\_\_ 6 Slide the stocking over toes, foot, and heel then roll or pull stocking up the leg. Ensure proper positioning.
- \_\_\_ **7 Smooth out the stocking to be sure there are NO twists or wrinkles** and heel of stocking (if present) is over heel and opening in toe (if present) is either over or under the toe area.
- \_\_\_ 8 Check the client’s toes for proper circulation (cold or bluish color and ask if any numbness or tingling in feet).
- \_\_\_ 9 Move to the other side of the bed and repeat for the opposite leg when providing client care. (Not done during testing)
- \_\_\_ 10 Completion Steps - Be sure to place bed in low position before leaving client.

**\* PROVIDE FOOT CARE** Page 218

- \_\_\_ 1 Preparation Steps (Client is sitting up in a chair next to the bed. Instructor or Observer will choose L or R foot. Listen Carefully.)
- \_\_\_ 2 Place a towel on the floor in front of client and arrange supplies.
- \_\_\_ 3 Fill basin with water and check water temp for safety & comfort. Ask client to verify water temp.
- \_\_\_ 5 Put on clean gloves and position the wash basin on the towel.
- \_\_\_ 6 Place client’s bare foot into the water to soak for 5 - 20 minutes. (This can be verbalized to save time in class and when testing)
- \_\_\_ 7 Apply soap to wet washcloth. Supporting the foot and ankle, lift foot from water and wash the foot including between the toes.
- \_\_\_ 8 Push back the cuticles gently with the washcloth.
- \_\_\_ 9 Use the same washcloth to rinse foot including between the toes (Note: Soapy foot can be placed back in basin but this doesn’t count towards rinsing. You MUST rinse with the washcloth including between the toes).
- \_\_\_ **10 Use a clean towel to dry the foot including between the toes.**
- \_\_\_ 11 Inspect the condition of the skin including toe nails.
- \_\_\_ 12 Apply lotion to your hands and rub it between hands to warm it. Lotion the top and bottom of foot removing excess with a towel. (Lotion must be applied for testing purposes, otherwise ask. Do NOT massage the client’s leg area. Avoid getting lotion between toes.)
- \_\_\_ 13 Put on client’s socks and replace shoe if it was on.
- \_\_\_ 14 Empty, rinse, and dry the basin and place in designated storage area.
- \_\_\_ 15 Dispose of used linen into soiled linen container and put away all supplies.
- \_\_\_ 16 Completion Steps

**GIVE COMPLETE BED BATH** - Page 222

## PROVIDE HAND & FINGERNAIL CARE - Page 218

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Place a towel on the over-bed table, arrange your supplies, check water temp for safety & comfort. Asks client to verify comfort also.
- \_\_\_ 3 Position client in Fowler's position (75-90 degrees).
- \_\_\_ 4 Put on clean gloves. Place the wash basin on the towel.
- \_\_\_ 5 Place client's hand into the water to soak for 5 minutes.
- \_\_\_ 6 Apply soap to wet washcloth. Supporting the hand and wrist, lift hand from water and wash the hand including between the fingers.
- \_\_\_ 7 Push back the cuticles gently with the washcloth.
- \_\_\_ 8 Use the orange stick to gently clean under the nails. Wipe the orange stick on the towel after each nail.
- \_\_\_ 9 Rinse hand including between the fingers.
- \_\_\_ 10 Use a clean towel to dry the hand including between the fingers and inspect the condition of the skin.
- \_\_\_ 11 Trim nails straight across just beyond finger tips and file with an emery board if necessary. (Not done on Diabetic Clients)
- \_\_\_ 12 Apply lotion to the hand removing excess with a towel.
- \_\_\_ 13 Empty, rinse, and dry the basin and return to storage area.
- \_\_\_ 14 Dispose of used linen into soiled linen container.
- \_\_\_ 15 Completion Steps

## \* PROVIDE PERINEAL CARE (*Testing Set Up: Female manikin lying in bed, gown on, covered with sheet*) - Page 220

- \_\_\_ 1 Preparation Steps (You can use siderail or ASK partner/Observer to stand on the side to which client is turned. This is not assumed.)
- \_\_\_ 2 Layout a clean towel on over-bed table. Fill wash basin with warm water (105 – 115 degrees).
- \_\_\_ 3 Ask client to verify water temperature is comfortable and the place basin on the clean towel.
- \_\_\_ 4 Raise side rail on the side of the bed resident will be rolling or ask partner/observer to stand on that side of the bed.
- \_\_\_ 5 Lower the head of the bed as low as the client can tolerate and RAISE BED HEIGHT.
- \_\_\_ 6 Put on clean gloves.
- \_\_\_ 7 Ask the client to bend their knees and spread their legs as much as possible.
- \_\_\_ 8 Ask client to raise their buttocks to place pad/linen protector under perineal area before washing or have them roll over if needed.
- \_\_\_ 9 Raise gown just above pubic hair area then pull the top sheet below hips to expose only perineal area and avoid overexposure of client.
- \_\_\_ 10 Wet the washcloth and apply soap.
- \_\_\_ 11 Wash the pubic hair on lower abdomen area then the groin areas on each side using a clean area of the washcloth for each stroke.
- \_\_\_ 12 Use a clean washcloth to rinse the soap from the area using the same steps as you did when washing.
- \_\_\_ 13 Towel dry the area using the same steps as you did when washing and rinsing. (*Steps 11-13 not done while testing to save time.*)
- \_\_\_ 14 Verbalize & PERFORM separation of labia while washing, rinsing and drying vaginal area.
- \_\_\_ **15A FEMALE:** Using a clean washcloth, wash from top to bottom with each swipe. Wash one side of the labia using one gentle motion then using a clean area of the cloth, wash the other side of the labia, **then using a 3<sup>rd</sup> area of the washcloth gently wash down the center of the peri area.**
- \_\_\_ **15B - MALE:** *Retract the foreskin if uncircumcised. Wash around the urinary meatus in a circular motion using a clean surface of the washcloth for each stroke, wash the head of the penis in the same fashion, wash the shaft of the penis towards the thighs, then wash scrotum and the groin area. Use same technique to rinse and dry. Replace the foreskin to natural position.*
- \_\_\_ 16 Use a clean washcloth to rinse soap from genital area using the same steps as you did when washing.
- \_\_\_ 17 With a clean area of the towel pat dry the genital area, then cover client with sheet or gown.
- \_\_\_ **18** After cleaning the genital area, ask client to roll towards the siderail (assist if needed), then wash both butt cheeks using clean area of washcloth for each swipe washing upwards towards tailbone. **Then wash the rectal area moving from rectum towards tailbone using a clean area of the washcloth** for each stroke. Then rinse using a clean wash cloth in same way and pat the area dry.
- \_\_\_ 19 Remove the linen protector and reposition client on back so they are comfortable using proper body mechanics.
- \_\_\_ 20 Ensure client is covered with gown and top sheet. Properly dispose of used linens into hamper avoiding contact with your clothing.
- \_\_\_ 21 Empty, rinse, and dry basin. Place basin in designated storage area.
- \_\_\_ 22 Remove and dispose of gloves and complete **handwashing** as directed within that skill.
- \_\_\_ 23 Completion Steps

## GIVING A BACK RUB - Page 227

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Lower head of bed, place bath blanket on top of patient and fold down bed linens.
- \_\_\_ 3 Assist client with removing or adjusting top. Turn patient to side and adjust blanket to expose their back.
- \_\_\_ 4 Squeeze lotion into palm and rub palms together to warm lotion.
- \_\_\_ 5 Starting at the base of the spine and using large circular motions, move up the spine toward shoulders then down the side of the back. Repeat this technique for 3 - 5 minutes to increase patient's circulation.
- \_\_\_ 6 Return client to supine position, assist with top, pull up bed linen. Remove bath blanket and place in hamper.
- \_\_\_ 7 Completion Steps

**ASSISTING WITH A SHOWER OR BATH** - Page 225

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Prepare tub/shower room, turn on heater. Place folded towel on shower chair or tub seat. Place towel on seat where client will dry off.
- \_\_\_ 3 Return to client and assist to tub/shower room ensuring the client is fully covered.
- \_\_\_ 4 Undress and transfer to shower/tub chair. Cover with bath blanket. Place shower cap on client if they would like one.
- \_\_\_ 5 Allow water to warm up, let client check temp before placing directly under running water or put client in tub, use hand held shower faucet to let client check water temp and shampoo clients hair while waiting for the rest of the tub to fill. Provide washcloth for eyes.
- \_\_\_ 6 Encourage client to do as much as possible and assist as needed washing from cleanest areas to dirtiest parts of body as with bed bath.
- \_\_\_ 7 Open drain to tub while using hand held shower to rinse well or rinse well, then shut off shower. Put dry towel over wet hair. Put towels or bath blanket over body. Roll shower chair or transfer client from tub to thoroughly dry all surfaces of skin.
- \_\_\_ 8 Apply body products per client's preference.
- \_\_\_ 9 Assist with dressing & complete hair care.
- \_\_\_ 10 Assist client to chosen location.
- \_\_\_ 11 Completion Steps then return to shower room, clean and sanitize per facility protocol.

**\* GIVE MODIFIED BED BATH (FACE AND ONE ARM, HAND AND UNDERARM)** - Page 222

- \_\_\_ 1 Preparation Steps RAISE BED HEIGHT
- \_\_\_ 2 Fill a wash basin with water. Check the water temperature for safety and comfort THEN ask client to verify comfort of water.
- \_\_\_ 3 Lower the head of the bed as low as the client can tolerate and put on clean gloves.
- \_\_\_ 4 Cover client with a bath blanket, fan fold top sheet to client's waist. Remove client's gown and place it in the soiled linen container.
- \_\_\_ 5 Wash BOTH of the clients eyes with wet washcloth (NO SOAP), using a different area of the washcloth for each stroke. Wash from the inner aspect of the eye to the outer aspect, then proceed to wash the entire face.
- \_\_\_ 6 Pat dry client's eyes and face with towel.
- \_\_\_ 7 Expose one arm and place a towel underneath the arm.
- \_\_\_ 8 Apply soap to the wet washcloth.
- \_\_\_ 9 Wash arm, hand, and underarm, keeping the rest of body covered.
- \_\_\_ 10 Rinse and pat dry arm, hand, and underarm.
- \_\_\_ 11 Move client's body gently and naturally, avoiding force and over-extension of limbs and joints.
- \_\_\_ 12 Put a clean gown on the client.
- \_\_\_ 13 Empty, rinse and dry basin. Return basin to designated storage area.
- \_\_\_ 14 Dispose of linen into soiled linen container avoiding contact with your clothing.
- \_\_\_ 15 Remove and dispose of gloves. Sanitize hands.
- \_\_\_ 16 Completion Steps

**Chapter 14.....**

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**MEASURING INTAKE** – Page 239

**FOOD INTAKE** – Must be recorded within 25% of Instructor / Observer.

- \_\_\_ 1 Visually cut plate into 10 even sections.
- \_\_\_ 2 Total amount of sections containing little to no food. Each section equals 10%.
- \_\_\_ 3 Record amount per facility procedure.
- \_\_\_ 4 Report any changes in amount person normally eats to nurse.

**FLUID INTAKE** (Note: Record in ml / cc / oz depending on facility policies) Must be recorded within 60 ml of Instructor / Observer.

- \_\_\_ 1 Use facility approved measurements and abbreviations.
- \_\_\_ 2 Estimate how much was consumed from each glass and combine totals.
- \_\_\_ 3 Record total estimated intake per facility policy.

**IV and GASTROSTOMY TUBING SAFETY** – Page 240

- \_\_\_ 1 Make sure hands are clean and gloves are worn whenever handling tubing.
- \_\_\_ 2 Observe tubing to make sure there are no kinks, bends, or creases.
- \_\_\_ 3 Observe to make sure tubing is not disconnected.
- \_\_\_ 4 Ensure client is not laying on tubing.
- \_\_\_ 5 Gastrostomy Feeding: Client should be raised at least 30 degrees during feeding and for at least 30 minutes after.

**\*FEED CLIENT WHO CAN'T FEED SELF** - Page 243

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Before feeding client, pick up their name card from tray and ask client to state their name.
- \_\_\_ 3 Assist client to an upright sitting position (AT LEAST 45 degrees) by elevating the head of the bed.
- \_\_\_ 4 Protect client's clothing from soiling and place tray where the food can be easily seen by client.
- \_\_\_ 5 Wash & dry client's hands with wet washcloth and hand towel BEFORE feeding (*just wet it at the sink with HOT H2O and ring it out*).
- \_\_\_ 6 Sit down facing the client during feeding. Remember to wipe clients face and hands at least once during the meal.
- \_\_\_ 7 Tell client what foods are on tray and ask client what they would like to eat first.
- \_\_\_ 8 Offer food in small amounts at a reasonable rate, allowing client to chew and swallow, telling the client the contents of each spoonful.
- \_\_\_ 9 Offer each beverage frequently during meal or as directed on menu card.
- \_\_\_ 10 Ask the client if they are ready for the next bite of food or sip of beverage, telling client the content of each spoonful (If the client is unable to respond, make sure client's mouth is empty before offering more) AND WIPE MOUTH FREQUENTLY.
- \_\_\_ 11 When client states they are full, clean client's face & hands with wet washcloth and leave client sitting upright at least 30 degrees.
- \_\_\_ 12 Remove food tray. **Record intake of solid food eaten within 25% of Instructor or Observer. Record fluid intake within 60ml.**
- \_\_\_ 13 Place tray in designated storage area.
- \_\_\_ 14 Completion Steps

**Chapter 15**.....

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**ASSIST WITH USE OF COMMODOE** - Page 261

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Position commode next to client's bed on client's stronger side. (Angle the commode towards the bed next to clients thigh as with w/c)
- \_\_\_ 3 Lift lid of commode making sure bucket is under seat properly and remove cover if present.
- \_\_\_ 4 Transfer client to commode using transfer technique outlined in care plan.
- \_\_\_ 5 Before assisting client to a sitting position, ensure clothing is out of the way.
- \_\_\_ 6 Provide client with TP, hand wipes, and call light and instruct client to clean hands when finished.
- \_\_\_ 7 Remove gloves and wash hands before leaving the room or stepping behind curtain. Check on client every 5 minutes.
- \_\_\_ 8 When client is finished, put on clean gloves.
- \_\_\_ 9 Assist client to standing position and assist with peri-care as needed. Adjust clothing and transfer back to bed/chair.
- \_\_\_ 10 Remove bucket from commode and replace lid. Take bucket to the bathroom and if needed, observe and measure contents.
- \_\_\_ 11 Empty contents of bucket into toilet. Rinse and empty rinse water into toilet and return bucket to proper place.
- \_\_\_ 12 Completion Steps – Report abnormal findings.

**ASSIST WITH USE OF URINAL** - Page 264

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Before placing urinal, assist client to a comfortable position (lying down, sitting on side of bed, or standing).
- \_\_\_ 3 Put on clean gloves before handling urinal and assist with placement and positioning.
- \_\_\_ 4 If no need to remain in room, ensure call light, TP, and hand wipes are within reach. Instruct client to clean hands when finished.
- \_\_\_ 5 Remove gloves and wash hands before leaving the room or stepping behind curtain. Check on client every 5 minutes.
- \_\_\_ 6 When client is finished, put on clean gloves.
- \_\_\_ 7 Have client hand you the urinal. If unable to hand it to you, assist with removing urinal and wiping client as needed. Close the lid.
- \_\_\_ 8 Hook urinal on foot board or side rail. Return client to a comfortable position. Cover client or adjust clothing.
- \_\_\_ 9 Take urinal to the bathroom and if needed, observe and measure contents.
- \_\_\_ 10 Empty contents of urinal into toilet. Rinse and empty rinse water into toilet and return urinal to proper place.
- \_\_\_ 11 Completion Steps

**APPLYING A CONDOM CATHETER** - Page 265

NOTE: This is used more in home care. The instructor has one available in the classroom for demonstration purposes.

**COLLECTING A ROUTINE URINE OR STOOL SPECIMAN** - Page 266

**COLLECTING A CLEAN CATCH (MIDSTREAM) URINE SPECIMAN** - Page 267

**PERICARE FOR A CLIENT WITH A CATHETER – NOTE: Finish by cleaning the catheter.**

This step is not in the book but please understand that you must provide complete peri-care on all patients with an indwelling catheter.

**\* ASSIST WITH USE OF BEDPAN/FRACTURE PAN AND URINARY OUTPUT w/ HANDWASHING** - Page 262

- \_\_\_ 1 Preparation Steps (Bedpan remains in nightstand until client is in the side-lying position and ready to be placed on pan.)
- \_\_\_ 2 Gather your supplies including paper towel and graduate container. Lower the head of bed so client is lying flat and raise side rail on the side of the bed that the patient will be turning towards.
- \_\_\_ 3 Fan fold top sheet so it is just below client's hips
- \_\_\_ 4 Put on clean gloves and assist client to a side-lying position (When testing, you may ASSIST the client to lift their hips)
- \_\_\_ 5 Place disposable bed protector under the client's buttocks (Bed protector not needed when testing but can be placed and left in place).
- \_\_\_ 6 With gloved hand remove bed pan from lower half of nightstand and immediately position bedpan or FRACTURE PAN correctly under client's buttocks.
- \_\_\_ 7 Assist client to roll back onto the bedpan. Cover client with top linens and raise the head of bed to a comfortable level.
- \_\_\_ 8 Ask client to bend their knees for comfort.
- \_\_\_ 9 Ensure toilet tissue and call light are within client's reach. Ask client to signal when finished.
- \_\_\_ 10 Provide client with privacy by stepping behind curtain.
- \_\_\_ 11 Obtain a wet wash cloth and towel. Return to bedside when directed and ASSIST client to wash and dry hands.
- \_\_\_ 12 Dispose of dirty linens.
- \_\_\_ 13 Lower head of bed before removing bedpan/fracture pan. Avoid over exposure by folding back top sheet close to client's hips.
- \_\_\_ 14 Remove bedpan with one hand. While holding the bedpan in one hand instructor/observer pours unknown amount of liquid into the pan. Cover client back up and immediately go empty contents of bedpan/fracture pan into graduate container without spilling.
- \_\_\_ 15 Rinse bedpan and pour rinse into toilet/commode and place in storage area THEN obtain urinary output per skill direction.
- \_\_\_ 16 Empty contents of graduate into the toilet/commode and rinse. Dump rinse water into the toilet/commode and place in storage area.
- \_\_\_ 17 Remove and dispose of gloves.
- \_\_\_ 18 Complete **handwashing. Record output within 25 ml of observer.**
- \_\_\_ 19 Return to client and finish with the "Completion Steps" including lowering bed and side rails.

**\* FEMALE CATHETER CARE & HANDWASHING** (*Set up: Female manikin lying in bed, gown on, covered with sheet*) - Page 268

- \_\_\_ 1 Preparation Steps (Under normal circumstances, peri-care would also be done with cath care.)
- \_\_\_ 2 Fill basin with warm water and check water temperature. Ask client to verify water temperature.
- \_\_\_ 3 Put on clean gloves.
- \_\_\_ 4 Lower head of bed as tolerated. Place bed protector under perineal area before washing.
- \_\_\_ 5 Expose area surrounding catheter by raising gown just above pubic hair area & lower top sheet below hips to avoiding over-exposure.
- \_\_\_ 6 Verbalize process while actually checking to see that urine can flow, unrestricted into the drainage bag and that there are no kinks, twists in tubing, that it is attached at the thigh properly and that there are no signs of leakage around the urethra.
- \_\_\_ 7 Apply soap to a clean, wet washcloth.
- \_\_\_ 8 Wash around the catheter tube where it exits the urethra. Do at least 2 swipes around the tubing using a clean area for each swipe.
- \_\_\_ 9 **While holding catheter at the meatus where it exits the body without tugging**, clean at least four inches of catheter from meatus, **moving in only one direction, away from meatus**, using a clean area of the cloth for each stroke (*You can use the wrap around method*) *Must wipe cath tube at least 2 times.*
- \_\_\_ 10 With a clean washcloth, rinse around the catheter tube where it exits the urethra. Do at least 2 swipes around the tubing using a clean area for each swipe.
- \_\_\_ 11 While holding the catheter at meatus without tugging, rinse at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the cloth for each stroke (*You can use the wrap around method*) *Must wipe cath tube at least 2 times.*
- \_\_\_ 12 While holding catheter at meatus without tugging, use a clean washcloth to pat dry catheter moving away from meatus.
- \_\_\_ 13 **DON'T TUG/PULL TUBING FROM BODY AT ANY TIME DURING PROCEDURE. ENSURE PRIVACY AT ALL TIMES.**
- \_\_\_ 14 Empty, rinse, and dry the basin and place in designated storage area. Remove bed protector.
- \_\_\_ 15 Ensure client is covered with gown and sheet. Dispose of used linens into soiled linen container avoiding contact with your clothing
- \_\_\_ 16 After disposing of used linen and cleaning equipment, properly remove & dispose of gloves without contaminating self.
- \_\_\_ 17 Completion Steps then complete **handwashing** as directed within that skill.

**\*CATHETER TUBING SAFETY** - Page 256 (This skill is done at the same time as catheter care.)

- \_\_\_ 1 Make sure tubing is secured to inner thigh.
- \_\_\_ 2 Keep tubing lower than bladder and drainage bag lower than tubing.
- \_\_\_ 3 Keep free of kinks, bends and creases.
- \_\_\_ 4 Avoid pulling on tubing.
- \_\_\_ 5 Don't allow tubing to touch or drag on floor.
- \_\_\_ 6 Don't disconnect tubing from drainage bag.



**\*EMPTYING & MEASURING URINARY DRAINAGE BAG** - Page 267 (Completed as part of PPE when testing.)

- \_\_\_ 1 Preparation Steps - A barrier is needed on the floor for placement of graduate before emptying and another on counter for reading
- \_\_\_ 2 Place a clean barrier on the floor under the drainage bag (paper towel).
- \_\_\_ 3 Place the graduate on the previous placed barrier. Open the drain to allow the urine to flow into the graduate until bag is empty.
- \_\_\_ 4 Avoid touching the graduate with the tip of the tubing, then close the clamp.
- \_\_\_ 5 Wipe the drain tube with alcohol wipe and return drain to holder.
- \_\_\_ 6 Place a paper towel on the counter. Place graduate on top of it to read urinary output. At eye level, obtain and remember measurement.
- \_\_\_ 7 Empty graduate into commode/toilet, rinse, and empty rinse water in commode. (Do NOT dry.) Return equipment to storage area.
- \_\_\_ 8 Discard barrier into garbage.
- \_\_\_ 9 Properly remove your gloves and dispose in the appropriate container.
- \_\_\_ 10 Completion Steps
- \_\_\_ 11 **Record the output in cc/ml on signed recording sheet.**

**\* MEASURES AND RECORDS URINARY OUTPUT** (This is completed as part of Bedpan/Fracture pan and cath care when testing)

- \_\_\_ 1 Preparation Steps - A barrier is needed for placement of graduate before reading.
- \_\_\_ 2 **Slowly pour the contents of the bed/fracture pan into graduate without spilling or splashing urine outside of container.**
- \_\_\_ 3 Rinse bedpan and pour rinse into toilet/commode. Do NOT Dry. Place bedpan in the Storage Area.
- \_\_\_ 4 Measure the amount of urine at eye level with container on flat surface.
- \_\_\_ 5 After measuring urine, empty contents of graduate into toilet/commode.
- \_\_\_ 6 Rinse graduate and pour the rinse into toilet/commode. Do NOT dry. Place graduate in the Storage Area.
- \_\_\_ 7 Remove and properly dispose of gloves without contaminating self.
- \_\_\_ 8 Completion Steps. Wash your hands.
- \_\_\_ 9 **Record the contents of container within plus or minus 25 ml/cc of Instructor or Observer's reading.**

**CHANGING A OSTOMY APPLIANCE** - Page 271

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Cover over-bed table with towel and fill wash basin with warm water. Place basin and additional supplies on table.
- \_\_\_ 3 Put on gloves. Lower the head of the bed as low as client can tolerate.
- \_\_\_ 4 Fold top linens out of the way, keeping the clients legs covered. Adjust the client's clothing as needed to expose the stoma. Position the bed protector alongside the client.
- \_\_\_ 5 Remove the soiled ostomy appliance by holding the skin and gently peeling the appliance off, starting at the top, and place the soiled ostomy appliance in the bedpan.
- \_\_\_ 6 Wipe around the stoma with toilet paper and place toilet paper in the bedpan.
- \_\_\_ 7 Wet the washcloth. Apply soap or other cleansing agent, if ordered. Wash, rinse, and dry the area around the stoma.
- \_\_\_ 8 If the client uses an ostomy appliance deodorant, place the deodorant in the new ostomy appliance. Apply skin adhesive, if used. Apply the new appliance over the stoma ensuring there are NO wrinkles. (Refer to Facility Policies)
- \_\_\_ 9 Remove gloves and wash your hands.
- \_\_\_ 10 Assist client with clothing as needed. Arrange top linens back over the client. Raise the head of the bed as requested.
- \_\_\_ 11 Put on a clean pair of gloves. Take bedpan to the bathroom. Properly dispose of the ostomy appliance.
- \_\_\_ 12 Completion Steps

**GIVING A PERSON AN ENEMA** - Page 272 (This is usually just discussed.)

You will not do this while working in a nursing home but you could perform this skill working in home care.

**APPLYING A WARM OR COLD COMPRESS** - Page 283 & 286 (This is usually just discussed.)

**APPLYING AN AQUATHERMIA PAD** - Page 284 (This is usually just discussed.)

**OXYGEN TUBING SAFETY** - page 301 (Discussed in the classroom and if possible, demonstrated in the clinical site.)

- \_\_\_ 1 Check regularly to see that tubing is in place and not kinked.
- \_\_\_ 2 Provide good skin care around nose, cheeks and ears.

**PROVIDING POSTMORTEM CARE** - Page 337

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 If family is present, greet them sympathetically and explain procedure.
- \_\_\_ 3 Cover over-bed table with towel and fill wash basin with warm water. Place basin on table.
- \_\_\_ 4 Put on gloves, lower the bed, and place client into the supine position.
- \_\_\_ 5 Close the client's eyes.
- \_\_\_ 6 With approval from supervisor, remove any medical equipment.
- \_\_\_ 7 Remove jewelry ensuring you are following facility policy (usually wedding and engagement rings are left on) Place remaining jewelry in envelope or small plastic bag and record each item on inventory sheet as you remove it.
- \_\_\_ 8 If client has dentures, ensure they are properly placed in the client's mouth and close the mouth.
- \_\_\_ 9 Place a bath blanket over the body and remove client's clothing. Wash and dry the body and redress in a clean gown.
- \_\_\_ 10 Replace the bottom sheet if necessary. Place a bed protector under the client's buttocks.
- \_\_\_ 11 Place a clean top sheet on top of the client's legs and torso and make a neat cuff. DO NOT cover the client's face.
- \_\_\_ 12 Completion Steps
- \_\_\_ 13 Ensure work area is clean and dim the lights before inviting the family back into the room. Provide privacy and leave the room.
- \_\_\_ 14 Check frequently with the family to see if there is any further care is needed.

**MEASURES AND RECORDS BLOOD PRESSURE** (*This can NOT be taught during the 120-hour classroom portion of the class.*)

- \_\_\_ 1 Preparation Steps
- \_\_\_ 2 Position the client appropriately – arm palm up resting comfortably on bed or lap. Feet flat on the floor if sitting.
- \_\_\_ 3 Clean diaphragm and ear pieces with alcohol wipe and discard wipe.
- \_\_\_ 4 Turn screw on bulb to left and squeeze excess air out of cuff, expose person's upper arm and locate brachial pulse.
- \_\_\_ 5 Place cuff snugly on person' arm about one inch above elbow and arrow directly over brachial artery.
- \_\_\_ 6 Place ear pieces in ears with tips facing forward and place diaphragm over brachial pulse.
- \_\_\_ 7 Inflate cuff and let air out slowly (2 – 4 mm Hg per second) listening for the first pulse sound –remember that number – then listen for when pulse sounds stops or changes and remember that number. Deflate cuff all the way and remove from client's arm.
- \_\_\_ 8 Record reading. Clean and put away supplies.
- \_\_\_ 8 Wash your hands.

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